

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements OMB No 1545-0052

For	alen	lar year 2009, or tax ye	ear beginning SEP	1, 2009	, and ending	AUG 31, 2010)
G	heck	all th å t apply	Initial return	Initial return of a	former public charity	Final return	1
			Amended return	Address cha	nge 💮	Name change	
Use	the I	RS Name of foundation	n			A Employer identification	n number
	abel					0.1.15:	
_	erwis	-, 	NG FOUNDATIO			91-1747663	3
	print r tune		PO box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	: 0 0
	r type Spec					425-861-85	
	ructio	on I City of town, state,		2.2		C If exemption application is i	
		"REDMOND,				D 1. Foreign organization 2. Foreign organizations m check here and attach c	S, Check here eting the 85% test.
H (_	type of organization	X Section 501(c)(3) ex		4.4	check here and attach c	omputation
<u> </u>		tion 4947(a)(1) nonexe		Other taxable private founding method X Cash		E If private foundation sta	
		rket value of all assets a	· · · —	ther (specify)	Accrual	under section 507(b)(1	
	·\$	art II, col. (c), line 16) 1 2	27,640. (Part I, colu.	mn (d) must be on cash	basis)	F If the foundation is in a under section 507(b)(1	
	irt l	Analysis of Revenue			(b) Net investment	1	(d) Disbursements
	11 6 1	(The total of amounts in connecessarily equal the amo	olumns (b), (c), and (d) may not	(a) Revenue and expenses per books	income	(c) Adjusted net income	for chantable purposes (cash basis only)
_	1	Contributions, gifts, gra		30,000	•	N/A	Cossi Busis Only)
			atton is not required to attach Sch. B			7.7.77	
	3	Interest on savings and tem cash investments					
	4	Dividends and interest t	from securities	3,866	3,866.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)					
a	6a	Net gain or (loss) from sale		11,829			
an a	b	Gross sales price for all assets on line 6a	30,193.		W. W		
Revenue	7	Capital gain net income (fro	om Part IV, line 2)	<u> </u>	11,829.		<u> </u>
	8	Net short-term capital g	gain				<u> </u>
	9	Income modifications Gross sales less returns	1				
	10a	and allowances		- '-t			, , , , , , , , , , , , , , , , , , , ,
		Less Cost of goods sold	L				
•	1	Gross profit or (loss)					
	11 12	Other income Total Add lines 1 throi	ugh 11	45,695	15,695		
	13	Compensation of officers, of		0			0.
	14	Other employee salaries					
	1	Pension plans, employe	•	· · · ·		DE0-	
ses	16a	Legal fees				RECE	VFD
ğ	b	Accounting fees	STMT 2	2,915	. 0.	. 0	70 0.
֓֞֟֝֟֝֟֝֟֝ ֡	C	Other professional fees	3			NOV 1	5 2010
<u>ĕ</u> .	17	Interest					2010
Operating and Administrative Expenses	18	Taxes	STMT 3	38	0.]≝ 0.
nis	19	Depreciation and deple	tion			L UGDE	<u> </u>
Ē	20	Occupancy					
Ą	21	Travel, conferences, an	•				
a	22	Printing and publication	ns				
ting	23	Other expenses	1				
era	24	Total operating and ac		2 953	. 0		
õ	25	expenses. Add lines 13 Contributions, gifts, gra	-	2,953 5,000		•	0. 5,000.
	1	Total expenses and di		3,000			3,000.
	"	Add lines 24 and 25		7,953	. 0		5,000.
	27	Subtract line 26 from li	ine 12				
		Excess of revenue over exp		37,742			
-	1	Net investment incom			15,695		17 17 17 17 1 17 11 11 11 1 1 17 1 1 17 1 1 17 1 1 17 1 1
		Adjusted net income (i	if negative, enter -0-)			N/A	
923			t and Panerwork Reduction	Ant Notice see the Instru	etione		Form 990-PF (2009)

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	6.	5.	5.
2 Savings and temporary cash investments	53,005.	22,210.	22,210.
3 Accounts receivable ►			
Less allowance for doubtful accounts			
4 Pledges receivable			
Less allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable	1		
Less allowance for doubtful accounts			
8 Inventories for sale or use	0.7		
9 Prepaid expenses and deferred charges	27.	19.	19.
108 investments - 0.5 and state government congations	40.000	111 050	105 105
b Investments - corporate stock STMT 4	43,322.	111,868.	105,406.
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis	_		
Less accumulated depreciation		···	
12 Investments - mortgage loans			
13 Investments - other	·····		
14 Land, buildings, and equipment basis	-		
Less accumulated depreciation	-		
15 Other assets (describe ►)			
	06 260	124 102	107 640
16 Total assets (to be completed by all filers)	96,360.	134,102.	127,640.
17 Accounts payable and accrued expenses			
18 Grants payable		_	
19 Deferred revenue			
Loans from officers, directors, trustees, and other disqualified persons			
Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
22 Other liabilities (describe ►)			
22 Total lightliting (add lines 17 through 20)	0.	0.	
23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	1	<u>U•</u>	
Touristic that to the Try, should have			
and complete lines 24 through 26 and lines 30 and 31			
24 Unrestricted 25 Temporarily restricted			
25 Temporarily restricted			
Temporarily restricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.	0.	0.	
27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	96,360.	134,102.	
30 Total net assets or fund balances	96,360.	134,102.	
30 Total net assets or fund balances	30,3001	131/102.	
31 Total liabilities and net assets/fund balances	96,360.	134,102.	
		101/1021	
Part III Analysis of Changes in Net Assets or Fund I	Balances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	∍ 30		
(must agree with end-of-year figure reported on prior year's return)		1	96,360.
2 Enter amount from Part I, line 27a		2	37,742.
3 Other increases not included in line 2 (itemize) ▶		3	0.
4 Add lines 1, 2, and 3		4	134,102.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	column (b), line 30	6	134,102.

923511 02-02-10

	and Losses for Tax on the liberal band in the kind (s) of property solo		t Income		low acquired	(c)) Date acquired	(d) Date sold
	rehouse, or common stock, 20				- Purchase - Donation	`7	mo , day, yr)	(mo, day, yr)
1a 175 BOEING					P		7/29/09	01/26/10
b 400 COINSTAR					P	0	1/26/10	05/05/10
<u>c</u>								
<u>d</u>	 					_		
<u>e</u>				<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			((h) Gain or (loss e) plus (f) minus	(g)
a 10,291.			7,48				 	2,802. 9,027.
ь 19,902.	· · · · · · · · · · · · · · · · · · ·		10,87	5.			.	9,027.
<u>c</u>					···		····	
<u>d</u>			·					
Complete only for assets showing	a dain in column (h) and owne	d by the foundation	n on 12/31/60			(I) C	oung (Col. (b) gain	minus
Complete only for assets showing	(1) Adjusted basis		xcess of col (I)				ains (Col. (h) gain), but not less tha	
(i) F M V as of 12/31/69	as of 12/31/69		col (j), if any	j			osses (from col (
a								2,802-
b								2,802. 9,027.
C								
d							•	
е								
	(If nam, also	enter in Part I. line	7	٦				
2 Capital gain net income or (net cap	ortal loss) (if (loss), ent	enter in Part I, line ter -0- in Part I, line	, e 7) [2			11,829.
3 Net short-term capital gain or (loss	•							
If gain, also enter in Part I, line 8, o	•	(0) 1112 (0)] [
If (loss), enter -0- in Part I, line 8					3		N/A	·
Part V Qualification U	nder Section 4940(e)	for Reduced	lax on Net	Inv	estment i	ncor	ne	
If section 4940(d)(2) applies, leave th Was the foundation liable for the sect If "Yes," the foundation does not quali Enter the appropriate amount in e	ion 4942 tax on the distributab fy under section 4940(e) Do r	not complete this pa	art					Yes X No
(a)	(b)		Triaking driy critis	(c)				(d)
Base periód years Calendar year (or tax year beginnin	Advisted avalities	ng distributions	Net value of no)	Distrit (col (b) div	oùtión ratio vided by col. (c))
2008		3,000.	 		98,5			.030450
2007		4,469. 3,950.			79,10		- · · · · ·	.056451
2006		3,500.			77,7			.047894
2005		1,000.			71,5			.013971
2004		1,000.			11,5	, , ,	<u> </u>	.013371
2 Total of line 1, column (d)							2	.193757
3 Average distribution ratio for the 5	s-vear base period - divide the	total on line 2 by 5	or by the number	r of ve	ars	ŀ		
the foundation has been in existen	· ·	total on mio 2 by o	, or by the number	oi yo	uis		3	.038751
	100 H 1000 Wall & Julio					Ì		
4 Enter the net value of noncharitab	le-use assets for 2009 from Pa	art X, line 5					4	101,441.
								•
5 Multiply line 4 by line 3							5	3,931.
						İ		······································
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6	157.
	•					Ī		
7 Add lines 5 and 6							7	4,088.
8 Enter qualifying distributions from	Part XII, line 4					Į	8	5,000.
If line 8 is equal to or greater than	line 7, check the box in Part V	I, line 1b, and com	plete that part usin	ng a 1'	% tax rate			
See the Part VI instructions								000 05
923521 02-02-10							F	orm 990-PF (2009)

Form	99 <u>0-</u> PF	(2009) THE	E SHARING	FOUNDATION				91-	17476	663		Page 4
Par	t VI	Excise Tax B	ased on Inves	tment Income (Section 4940(a)	, 4940(b), 4940(e), or 4	1948	- see in	stru		
1a	Exempt	operating foundations	described in section	1 4940(d)(2), check her	e 🕨 🔲 and enter '	'N/A" on line 1)					
	Date of i	ruling or determinatioi	n letter	(attach co	py of letter if necessa	ry-see instructions)						
b	Domesti	ic foundations that me	et the section 4940(e) requirements in Part	V, check here 🕨 🔀	and enter 1%	•	1			1	<u>57.</u>
	of Part I	, ifne 27b										
C .	All other	r domestic foundation	s enter 2% of line 27	b Exempt foreign orgai	nizations enter 4% of F	Part I, line 12, col (b)	J					
2	Tax und	ler section 511 (dome:	stic section 4947(a)(1) trusts and taxable for	undations only Others	enter -0-)		2				<u>0.</u>
3	Add line	s 1 and 2						3	ļ		1	57.
4	Subtitle	A (income) tax (dome	stic section 4947(a)	(1) trusts and taxable fo	undations only Others	s enter -0-)		4	ļ			0.
5	Tax bas	ed on investment inc	ome. Subtract line 4	from line 3 If zero or le	ess, enter -0-			5			1	57.
		Payments			1	1						
		timated tax payments	•		6	a	19.	4				
		foreign organizations				b						
		d with application for e		le (Form 8868)	6			-				
d	Backup	withholding erroneou	sly withheld		6	d		-	1			
		edits and payments. A	-					7				<u> 19.</u>
		ny penaity f or underpa	-		Form 2220 is attached			8				
				ne 7, enter <mark>amount ow</mark> e			•	9			1	38.
				es 5 and 8, enter the an	rount overpaid	1	•	10				
		e amount of line 10 to				Refu	nded 🚩	11	<u> </u>			
		A Statement						·				
	-	•	undation attempt to i	nfluence any national, s	tate, or local legislation	n or did it participate o	rintervene	e in	-		Yes	
	• •	tical campaign?							-	<u>1a</u>		X
				r directly or indirectly) t					-	1b	,,,,,,,,,,	<u> </u>
				tailed description of t	the activities and co	pies of any materials	publishe	ed or				
		ited by the foundati										v
		foundation file Form 1	-						-	10		X
				litures (section 4955) in			0.					
				0 • (2) On fou				_				
		•	· · · · · · · · · · · · · · · · · · ·	lation during the year fo	ir political expenditure	tax imposed on tound	ition					
		ers ►\$		ave not previously beer	roported to the IDCO					•		Х
					i reported to the ins ?				}	2		
		," attach a detailed (usly reported to the IRS	in ite governing inetri	imont articles of incor	noration	٥,				
		=	- · · · · ·	tach a conformed co		unione, articles of incor	puration,	01		3		х
	-			income of \$1,000 or mi					-	4a		X
		has it filed a tax return			oro during the year			N	I/A	4b		
				r substantial contraction	n during the year?			•	'`	5		X
		," attach the statem			in during the your				-			***************************************
			•	sections 4941 through	4945) satisfied either							
		nguage in the governir										
	•	• •	•	overning instrument so	that no mandatory dir	ections that conflict wi	th the stat	e law				
		in in the governing ins		• • •						6		Х
7		•		t any time during the ye	ar?					7	X	
		," complete Part II,							ľ			
		•		with which it is register	red (see instructions)	NONE						
. –			• 									
b	If the an	nswer is "Yes" to line 7	, has the foundation	furnished a copy of Fori	m 990-PF to the Attorn	ney General (or designa	te)					
				G? If "No," attach ex		•				8b	X	
9	is the fo	oundation claiming sta	itus as a private oper	ating foundation within	the meaning of section	1 4942(j)(3) or 4942(j)	(5) for cal	endar	ſ			
				ee instructions for Part						9		X
10	Did any	persons become sub	stantial contributors	during the tax year? if •	Yes,* attach a schedule lis	ting their names and addre	sses			10		X

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2009)

X

3b

4a

Yes X No

N/A

during the year?

prm 990-PF (2009) THE SHARING FOUNDATION			91-17476	63 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to		* * * * *		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), or	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations	(-	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	ib
Organizations relying on a current notice regarding disaster assistance check hi	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on	[]		
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1	6b X
If "Yes" to 6b, file Form 8870		<u></u>	.	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attributa		U:_b		7b
Part VIII Information About Officers, Directors, Trustors Paid Employees, and Contractors	ees, Foundation Ma	inagers, riigniy	<i>'</i>	
List all officers, directors, trustees, foundation managers and their	compensation.		 	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
	to position	611(81 -0-)	compensation	allowances
SEE STATEMENT 5	•	0.	o.'	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				
		<u></u>		
		ļ		
	<u> </u>		<u> </u>	
Total number of other employees paid over \$50,000			<u> </u>	0
			Form	990-PF (2009)

•	orm	990-PF	(2009)

THE SHARING FOUNDATION

91-1747663	9	1 -	-1	7	4	7	6	6	3
------------	---	-----	----	---	---	---	---	---	---

Page 7

Part VIII Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, ent	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	 	
		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	tistical information such as the	_
number of organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
1 N/A		
2		
3	·	
		
4		
D. AM D.		
Part X-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
27/2	on mies i and z	Ainount
1N/A		
0		
2		
All other program-related investments. See instructions		
3		
V		
	111	0.

P	art X Minimum Investment Return (All domestic foundations mus	at complete this part. Foreign fo	undations, see	nstructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc , purposes		
а	Average monthly fair market value of securities		1a	93,893.
b	Average of monthly cash balances		1b	93,893. 9,093.
C	Fair market value of all other assets		1c	
đ	Total (add lines 1a, b, and c)		1d	102,986.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	B 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	102,986.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4	1,545.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Pa	art V, line 4	5	101,441.
6	Minimum investment return Enter 5% of line 5		6	5,072.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)	(j)(5) private operating foundations	and certain	
1	Minimum investment return from Part X, line 6		1	5,072.
2a	Tax on investment income for 2009 from Part VI, line 5	a 157		
b	Income tax for 2009 (This does not include the tax from Part VI)	b	7 1	
C	Add lines 2a and 2b		2c	157.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	157. 4,915.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	0. 4,915.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XII	I, line 1	7	4,915.
P	art XII Qualifying Distributions (see Instructions)			<u> </u>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	5,000.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)		3a	
	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and	Part XIII, line 4	4	5,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investing	•		
	income Enter 1% of Part I, line 27b		5	157.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	157. 4,843.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years whe	n calculating whether the foundation	qualifies for the	
	4940(a) raduation of tax in those years	•	•	

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7		da		4,915.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		**************************************	1,466.	
b Total for prior years		_		
		0.	**************************************	
3 Excess distributions carryover, if any, to 2009				
a From 2004	1			
b From 2005				
c From 2006				
d From 2007				
e From 2008	٨			
1 Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 5,000.				
			1,466.	
a Applied to 2008, but not more than line 2a	l		1,400.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •	1414114	. /*:::4*********************************
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2009 distributable amount		anem ar i milital illiadaa ladhiista		3,534.
e Remaining amount distributed out of corpus	0.	······		3,334.
5 Excess distributions carryover applied to 2009	0.	' ./ //2/14-14-14-14-14-14-14-14-14-14-14-14-14-1	· (l''- tl. i-ll	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			<u> </u>
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				······································
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				1,381.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	^			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	0			
not applied on line 5 or line 7	0.			······································
9 Excess distributions carryover to 2010.	0			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005 b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
2 ENGUIS HOIN 2000	- <u> </u>		1	Form 000 DE (2000)

OF ALASKA PO BOX 8033 KETCHIKAN, AK 99901 MAKE A WISH FOUNDATION 811 - 1ST AVE STE 520 SEATTLE, WA 98104 Total b Approved for Nutre payment NONE NONE CHARITY PUBLIC TO ASSIST ORG IN 175 PURPOSE 4,000 4,000 Total NONE	Part XV Supplementary Information	(continued)			
Name and address (home or business) 4. Pad during the year 14. Pad during the year 15. GROTHERS BIG SISTERS OF ALASKA PO BOX 8033 KETCHIKAN, AX 99901 MAKE A WISH FOUNDATION 811 - 1ST AVE STE 520 SEATTLE, WA 98104 Total 10. Approved for future payment NONE NONE			Payment		
a Pad during the year BIG BROTHERS BIG SISTERS OF ALASKA PO BOX 8033 KETCHIKAN, AK 99901 MAKE A WISH FOUNDATION 811 - 1ST AVE STE 520 SEATTLE, WA 98104 Total D Approved for future payment NONE NONE NONE PUBLIC CHARITY TO ASSIST ORG IN 1TS PURPOSE 1,000 TO ASSIST ORG IN 1TS PURPOSE 1,000 TO ASSIST ORG IN 1TS PURPOSE 1,000 TO ASSIST ORG IN 1TS PURPOSE A,000 NONE		show any relationship to	status of	Purpose of grant or contribution	Amount
BIG BROTHERS BIG SISTERS NONE PUBLIC TO ASSIST ORG IN ITS PURPOSE PURP		or substantial contributor	recipient		
Total D Approved for future payment NONE Total NONE	BIG BROTHERS BIG SISTERS OF ALASKA	NONE			1,000.
NONE NONE	MAKE A WISH FOUNDATION 811 - 1ST AVE STE 520 SEATTLE, WA 98104	NONE			4,000.
NONE NONE			<u></u>		
NONE				▶ 3a	5,000.
	b Approved for future payment				
Total Data Str. 0	NONE				
Total ▶ 3b 0					
	Total	· · · · · · · · · · · · · · · · · · ·		► 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	Unrelated business income		ed by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue	code		code	7.11100111		
a	-	<u>.</u>	+++			
b						
c	1 1					
f			+			
g Fees and contracts from government agencies	_					
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	3,866.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other				·		
than inventory			14	11,829.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b					 	
C	_					
d	_					
e				15 605		
12 Subtotal Add columns (b), (d), and (e)			0.	15,695.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	15,695.	
(See worksheet in line 13 instructions to verify calculations)					

Part XVI-B	Relationship of	of Activities to	the Accomplishmer	nt of Exempt Purpose

Line No.		the foundation's exempt purposes (other than by providing funds for such purposes)						
4					CHARITABLE			
-	10	TROVIDE	TONDO	1010	CHRITIADEL	DOMATIONS		
	├							
								
	ļ							
	<u> </u>							
	1							
•								
	1							
	1							
	+							
	┼							
	 							
	_							

923621 02-02-10

	rt X\	(111) T	agraina Transfer		sactions ar	nd Relationships With Non	charitable		ge is
-	11 () (Exempt Organ	•	rs to and trans	sacuons ai	id neiadoliships with Non	ici iar itabit	•	
1	Did th			e following with any of	her organization	described in section 501(c) of		Yes	No
		ode (other than section 501(c)							
а	Trans	fers from the reporting founda	ation to a noncharitable e	xempt organization of					
	(1) C						1a(1)		X
	(2) 0	ther assets					1a(2)		X
b	Other	transactions							
	(1) S	ales of assets to a noncharital	ble exempt organization				1b(1)		X
	(2) P	urchases of assets from a no	ncharitable exempt organ	ization			1b(2)		X
	(3) R	ental of facilities, equipment,	or other assets				1b(3)		X
	(4) R	eimbursement arrangements					1b(4)		X
	(5) L	oans or loan guarantees					1b(5)		X
	(6) P	erformance of services or me	mbership or fundraising	solicitations			1b(6)		X
		ng of facilities, equipment, ma	•				10		X
d						ays show the fair market value of the go		ets,	
		• •			fair market value	e in any transaction or sharing arrangen	nent, show in		
		nn (d) the value of the goods,				T (1)			
(a)	Line no	(b) Amount involved		charitable exempt org	anization	(d) Description of transfers, transaction	ns, and sharing ar	rangeme	nts
				N/A					
				<u> </u>					
			<u></u>				,		
	_		<u> </u>				-		
_			<u> </u>						
_									
			·						
							-		
_					_				
_						-			
				<u> </u>					
22	Is the	foundation directly or indirec	tly affiliated with or relati	ed to, one or more tax	exempt organiz	ations described			
		ction 501(c) of the Code (othe	•				Yes	X	No
h		s," complete the following sch	, .,						
		(a) Name of org		(b) Type o	f organization	(c) Description of re	lationship		
		N/A							
		penalties of penjury, I declare that I in motive Declaration of preparer (other				ents, and to the best of my knowledge and bel	lief, it is true, com	ect,	
	and con	niplete Declaration of preparer (offin	er than taxpayer or ilducially i	_		nas any knowledge			
	ME	1 miles		//	<u>-6-16</u>				
Sign Here	S	ignature of officer or trustee		Da	·	Title	Description 1		
뇨	_ຫ _	Preparer's			Di	ate Check if self- employed Check if self-	Preparer's identif	ying nun	inel
Šį	Paid Preparer's Use Only	signature	T DATE OF THE	6 00107777	DI I C	employed employed			
	Paid epare se On	Firm's name (or yours CLAR	RK, RAYMOND	& COMPANY	, PLLC	EIN P			
	žž	if self-employed) P.O. P.D.N	BOX 3188	77 2100			42E \ 00	1 0	500
		address, and ZIP code REDM	10ND, WA 980)73- <u>3</u> 188		Phone no (4	425) 86	<u>1-8</u>	200

923622 02-02-10

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

· 1	HE SHARING FOUNDATION	91-1747663
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions.
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in r aplete Parts I and II.	noney or property) from any one
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	~
aggregate contri	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cont butions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary for cruelty to children or animals. Complete Parts I, II, and III.	• • •
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cont use exclusively for religious, charitable, etc., purposes, but these contributions did not a cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions of \$5,000 or more during the year.	nggregate to more than \$1,000. Vely religious, charitable, etc ,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	· ·
LHA For Privacy Act an		B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE SHARING FOUNDATION

91-1747663

Part I	Çontributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DONALD B ROTTLER 8029 SO 200TH ST KENT, WA 98031	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT	
DIVIDEND INCOME	•		3,866.		0.	3,86	6.
TOTAL TO FM 990-PF, PART I, I	LN 4		3,866.		0.	3,86	6.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
CLARK RAYMOND & CO		2,915.		0.			0.
TO FORM 990-PF, PG 1, LN 16B		2,915.		0.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
990-PF TAXES LICENSE		8. 30.		0.			0.
							0.
LICENSE	CO	30.	E STOCK	0.		STATEMENT	0.
TO FORM 990-PF, PG 1, LN 18	CO	30.	E STOCK	0.	OK VALUE		0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	СО	30.	E STOCK	0.	OK VALUE 111,868.	STATEMENT FAIR MARKET	0. 0. 4

	VIII - LIST OF OFFIC			STATEMENT 5	
NAME AND ADDRESS			COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
DONALD B. ROTTLER 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
BARBARA D. ANGIE-ROTTLE 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
JOHN C. ROTTLER 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
D. EDSON CLARK 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
ANDREW C. ROTTLER 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
STEVEN ROTTLER 8350 164TH AVE NE REDMOND, WA 98052	BOARD OF		OR 0.	0.	0.
TOTALS INCLUDED ON 990-	PF, PAGE 6, PART VII	_ :I	0.	0.	0.